

IX. HOME HEALTH CARE FOR OLDER AND DISABLED ADULTS

Current Providers: _____

Home Health Services Provided: _____

Funding Sources: _____

Total Funding Last Fiscal Year: _____

Number of Consumers Served Last Fiscal Year: _____

Cost per Unit (for each funding source): _____

A. EXISTENCE Are these services available to older and disabled adults in your community?		
1. Does your community have at least one provider of home health services?	Yes	No
2. Does your community have at least one provider of acute care/short-term home health services that accepts public funding sources?	Yes	No
3. Does your community have at least one provider of long-term home health services that accepts public funding sources? (i.e. Are there Medicare certified providers enrolled with DMA?)	Yes	No
4. If your community does not have a provider of any of the above types of home health services, is there a provider in a neighboring county or community that could serve those in need?	Yes	No
OVERALL EXISTENCE RATING	1 2 3 4 5	

B. ADEQUACY					
Are these services in sufficient supply for those who need it?					
<p>1. Is there a waiting list for home health services?</p> <p>If so, how many people are waiting?</p> <p>Why is there a waitlist (ex. lack of funding, no provider)?</p> <p>(How many people are on the waiting list? What is the number of consumers currently receiving service? The ratio of number waiting ÷ number of people receiving services? How does the ratio compare to state rates and similar counties? If there is no one on the waiting list, is it because everyone who needs services receives them, providers do not keep waiting lists, etc.?)</p>			Yes		No
<p>2. If there is a waiting list, how acceptable is the average waiting time?</p> <p>(What is the average length of time a person is on a waiting list before services are received? What % of waitlisted individuals drop out or pass away before services are rendered?)</p>			1	2	3 4 5
<p>3. To what extent are home health services available to people in all areas of your community? Please list any uncovered areas:</p> <p>(Are there any areas in your community where providers will not send aides? If so, why?)</p>			1	2	3 4 5
<p>4. To what extent are home health services available to address all target populations and health care needs?</p> <p>(Are there any health care needs that home health providers can't assist consumers with? Are there patients with any specific diagnoses that some agencies will not serve [e.g. brittle diabetics or consumers with HIV]?)</p>			1	2	3 4 5
<p>5. How adequate is funding to provide a sufficient amount of home health service to all older and disabled adults in your community who need it?</p> <p>(What funding sources are accepted? Is there a wait list for consumers with specific funding sources? Do funding sources generally provide adequate reimbursement for the needs of consumers? What is the ratio of those receiving services compared to the general population (# of older and disabled adults receiving home</p>			1	2	3 4 5

health ÷ # of older and disabled adults in your community? How does this ratio compare to the state ratio and similar counties?)	
<p>6. To what extent are home health agencies a viable alternative to nursing facility care in your community?</p> <p>(What is the ratio of number of older/disabled adults receiving home health care vs. the number of older/disabled adults in nursing homes? What proportion of home health consumers have a level of functional impairment that would make them eligible for nursing home care? What proportion of nursing-home eligible consumers are served by CAP-DA, CAP-MR/DD, and CAP-AIDS?)</p>	1 2 3 4 5
7. How sufficient is the supply of home health providers in your community?	1 2 3 4 5
<p>8. To what extent does your community have a sufficient workforce to meet home health service delivery needs?</p> <p>(What is the average annual turnover rate for all home health aides in your community? For aides at each home health agency in your community? What is the average length of employment for aides in your community? For aides at each home health agency? What is the vacancy rate as a % of total positions? How do these numbers compare to state rates and similar counties? What are the comparable figures for nurses? For physical therapists and occupational therapists? For speech language therapists? For other allied health professionals? Do home health providers have programs in place to try increase retention rates?)</p>	1 2 3 4 5
OVERALL ADEQUACY RATING	1 2 3 4 5

C. ACCESSIBILITY

How obtainable are these services for those most in need?

1. To what extent do physicians in your community understand when and how to authorize home health services? (What % of physician referrals are appropriate?)	1 2 3 4 5
2. How successful are the outreach programs conducted for home health services in your community? (What types of public information, outreach and other informational programs are offered to the general public, caregivers, and others?)	1 2 3 4 5
3. To what degree are public communications and outreach activities consumer-friendly? (What public information, outreach and other informational programs are offered to the general public, caregivers, and others? What is the average reading level of materials? Are materials available in large-print? In Braille? In languages other than English, if appropriate for your community? Is broadcast media used? If so, how often are radio and/or cable notices broadcast?)	1 2 3 4 5
4. To what degree do older and disabled adults and their caregivers know about home health services in your community? (What % of consumers are self or family referred? What % of calls from potential consumers are appropriate for home health care?)	1 2 3 4 5
5. To what extent do key referral sources (hospital discharge planners, physicians and nurses, etc.) know about home health services in your community? (What % of referrals are from key referral sources? What % of these referrals are appropriate?)	3 4 5
6. To what extent are home health services affordable to everyone who needs assistance? (What are the fee schedules for these providers? What funding sources are accepted? What % of people are turned away each year because of an inability to pay (or lack of a funding source)? What is the per capita (for older and disabled adults) expenditure on home health services in your community? How does this compare to state	1 2 3 4 5

and similar county ratios?)	
OVERALL ACCESSIBILITY RATING	1 2 3 4 5

D. EFFICIENCY AND DUPLICATION OF SERVICES

How reasonable are the costs of services?

Are options for streamlining services available in the community?

1. If there are multiple providers of home health service, to what extent are the costs of services comparable across providers for the same level of service? (What are the ranges in per hour charges? Are there justified reasons for any large differences? How do these costs compare to state averages and similar counties?)	1	2	3	4	5
2. How reasonable are the administrative costs of providing home health services? (What % of the providers' total budget goes towards administrative expenses? How does this % compare to state averages and similar counties?)	1	2	3	4	5
3. If there are multiple providers, to what extent do they work together to best serve consumers? (Do home health providers have cooperative agreements with each other? How often do providers collaborate on projects or to serve consumers better? What types of projects do they work together on?)	1	2	3	4	5
3. How adequate and timely are the providers' screening and referral procedures? (How quickly is a potential client screened after initial contact [excluding time on a waiting list, if any]? What screening tools are used? Is the screening as brief as it can be while remaining thorough? What % of callers/potential consumers are referred from other agencies? What % of consumers accepted for home health services are given referrals for additional services that they might need?)	1	2	3	4	5
OVERALL EFFICIENCY AND DUPLICATION RATING	1	2	3	4	5

E. Equity					
How available are these services to all who need them without bias?					
1. To what extent are home health services available to all geographic areas in your community? (Are there any areas of your community where service is not available? If so, why? Are there any large areas of your community that are not represented in the home health client population? If so, why?)	1	2	3	4	5
2. To what degree are home health services available to all populations in your community without bias? (What are the demographic characteristics of home health consumers [e.g. age, race, gender, income level]? How do these characteristics compare to the general public (age 60+ or disabled)? Where there are differences, are these similar to differences noted for the state as a whole?)	1	2	3	4	5
3. To what extent are subsidized and private-pay home health consumers treated the same? (Are there agencies that only accept private-paying consumers? If so, how do they differ in the number or quality of services from providers who accept Medicaid, Medicare, or other public funding sources? Within agencies that accept Medicaid, Medicare, other public funding sources, <i>and</i> private-pay, are there differences in available services for subsidized vs. fee paying consumers? Which services are only private pay?)	1	2	3	4	5
4. If there is a waiting list, how sufficient is the system in place for prioritizing consumers in terms of need? (What are policies and procedures regarding prioritization?)	1	2	3	4	5
5. How sufficient are the home health providers' nondiscrimination policies? (What are the providers nondiscrimination policies? Do they differ from federal and state laws? How are staff and consumers educated about the nondiscrimination policies?)	1	2	3	4	5
OVERALL EQUITY RATING	1	2	3	4	5

F. Quality/Effectiveness How successful are these services in addressing consumers' needs?		
1. Are the home health agencies in your community licensed?	Yes	No
2. Are the home health agencies in your community JCAHO accredited?	Yes	No
1. How acceptable are the average staff turnover rates? (What are the annual staff turnover rates? How do they compare to state averages and similar counties? Do home health providers have any programs in place to try to help retention?)	1	2 3 4 5
2. To what extent are continuing educational opportunities available to home health aides in your community? (What training is provided in or near your community? Who provides this training [in-house staff, community colleges, or private companies]? How many providers pay for continuing education for aides in your community? How often are these workshops or courses offered? What % of aides take additional training, classes, and/or courses?)	1	2 3 4 5
3. How acceptable are the average wages for home health aides in your community? (What is the average hourly pay rate for aides in your community? What is the average hourly pay rate for staff employed by each home health service provider in your community? What are the highest and lowest pay rates for each provider? How does this compare to state averages and similar counties? Is there any way for a dedicated and skilled aide in your community to move into a job with more responsibility and higher pay?)	1	2 3 4 5
4. To what extent can home health providers offer benefits (such as health insurance, mileage, educational stipends, etc.) to home health aides? (What % of home health providers offer benefits to employees? What benefits are offered? How does this % compare to state averages and similar counties?)	1	2 3 4 5
5. To what extent does an advisory committee(s) guide the operations of the home health agencies in your community? (Who is on the advisory committees? Are consumers or their caregivers represented? What responsibilities do they have? How often do they meet?)	1	2 3 4 5

9. Do any funders regularly monitor home health services?	Yes	No
10. To what extent have the home health providers in your community conducted special quality assessment or improvement efforts? (What process, QA, and outcome evaluations have been conducted in the past 5 years? How have they been used)	1 2 3 4 5	
11. To what extent do the agencies act on consumers' feedback? (What policy and/or program changes have been made as a result of client feedback in the past five years?)	1 2 3 4 5	
12. To what extent do home health agencies survey consumers and their families to determine satisfaction and areas for improvement? (Have consumers been surveyed in the past 5 years? If so, what process was used? What were the major findings?)	1 2 3 4 5	
13. How sufficient is the complaint resolution process? (What is the official complaint resolution process? How many complaints were documented last year? What was the nature of the complaints? What % were resolved?)	1 2 3 4 5	
14. To what extent are complaints considered during planning, program development, or quality improvement efforts? (What policy and/or program changes have been made as a direct result of complaints in the past five years?)	1 2 3 4 5	
15. To what extent can home health services in your community accommodate the needs of all consumers and/or families requesting services? (Are consumers requesting services that are not provided? If so, which services? Why are these services currently unavailable?)	1 2 3 4 5	
16. To what degree do the days and times available for home health services meet the needs of consumers and their caregivers in your community? (What the days and hours of operation by the provider?)	1 2 3 4 5	

17.To what degree do home health agencies train aides to respect and honor cultural differences related to care? (Do you have training to sensitize staff to cultural differences? Is the training mandatory? What does the training involve?)	1	2	3	4	5
18.To what extent are participants enrolled in a timely manner? (What are the rules, policies, regulations governing admission and enrollment? What is the average length of wait time between initial contact and receiving service? What is the average length of time consumers get discharged from the hospital until the time they receive service? What is the process for authorizing DME under Medicaid/Medicare with respect to time?)	1	2	3	4	5
19.To what extent do home health agencies regularly communicate unmet needs to county commissioners, planning, and other agencies? (Are home health providers represented in meetings of county commissioners, planning boards, or other agencies? If so, how?)	1	2	3	4	5
OVERALL QUALITY/EFFECTIVENESS RATING	1	2	3	4	5

Recap of Overall Home Health Care Ratings					
Existence	1	2	3	4	5
Adequacy	1	2	3	4	5
Accessibility	1	2	3	4	5
Efficiency and Duplication	1	2	3	4	5
Equity	1	2	3	4	5
Quality/ Effectiveness	1	2	3	4	5

Home Health Care's Major Strengths:

Identified Barriers and Areas for Improvement: